Patient-Centered Medical Home Advisory Council Meeting Minutes November 2, 2011

Members on the Phone- Dr. Janice Gomersall, Montana Academy of Family Physicians; Carol Kelley, Bozeman Deaconess internal Medicine Associates; Dr. Paul Cook, Rocky Mountain Health Network; Todd Lovshin, Allegiance Life and Health Company; Pat Murdo, Legislative Services; Janice Mackenson, Mountain Pacific Quality Health; Dr. Doug Carr, Billings Clinic; Kris Juliar, Montana Office of Rural Health; Dr. Jay Larson, Independent Provider; Dr. Rob Stenger, Grant Creek Family Practice, St. Patrick's Hospital; Dror Baruch, EBMS, Cindy Stergar, Butte Silver Bow Primary Health Care Clinic; Dr. Tom Roberts, Western Montana Clinic

Members in Person- Dr. Bob Shepard, New West Health Services; **Paula Block**, Montana Primary Care Association; **Dr. Fred Olson**, BCBS MT; **Nancy Wilke for John Hoffland**, Montana Medicaid; Dwight Easterman, Mountain Pacific Quality Health; **Dr. Jon Griffin**, St. Peter's Medical Group

Members absent-Kristina Davis, Children's Defense Fund; Kirsten Mailoux, EBMS; Bob Olson, MHA; Bill Pfingsten, Bozeman Deaconess Health Group; Bernadette Roy, CHC-Partnership Health Center; Loren Schrag, HealthShare Montana; Dr. Jerry Speer, Benefis Health System; Claudia Stephens, Montana Migrant and Seasonal Farm Worker Council; Lisa Wilson, Parents, Let's Unite for Kids-PLUK; Rick Yearry, Mountain Pacific Quality Health Foundation, REC

The meeting was called to order at 1:02 PM by Chairman, Dr. Bob Shepard. Fifteen of the twenty-six council members were present either by phone or in person.

1. Approval of Minutes from Last Meeting

Dr. Olson made a motion to approve last meeting's minutes and Dr. Griffin seconded, they were approved unanimously.

2. Reports from Subcommittees

a. Framework for Payment- Members discussed the CMS Primary Care Initiative and the requirements for payers to submit letters of intent. BCBS, New West, Allegiance, and EBMS all plan to submit letters and Medicaid is considering doing so. The group also reviewed a straw man proposal for the framework for payment and further fleshed out a list of attributes for the data repository. Dr. Carr agreed to draft the straw man proposal in written form for Council review. Dr. Shepard made a motion to for the council to accept the FP notes, Dr. Fred Olson seconded and they were approved unanimously.

Quality Metrics- Dr. Shepard is working on updating the data points he received from Carol Kelley and planning to finalize the data set soon. The group approved two separate sets of guidelines for osteoporosis, The group discussed the survey for patient satisfaction and reminded members to join the NCQA webcast the next day at noon. Dr. Shepard made a motion to accept the QM notes, Paula Block seconded and they were approved unanimously.

3. Discussion on Draft Statement of Attributions of a Data System for Medical Homes

Dr. Shepard reviewed the list of attributions and opened the list up to discussion and comments. Members proposed the following additions be made to the list of attributions:

- Patient confidentiality needs to be embedded
- Available to all health care practices, not just those in a PCMH project
- Ability to interface with other data systems such as state systems, case management programs within Medicaid, health information exchanges, assessments done by the state on communicable diseases (syndromic surveillance), and the immunization registry.
- Mechanism for linking with de-identified data sets in the state.
- Needs to be housed and managed in a neutral organization outside any payer or provider group
- A way for patient historical data to be transferred when they move between payers.
- Compliance with HIPAA
- A way to know about widely varying costs around the state for a procedure for greater awareness of cost data, capacity for cost data, to aggregate it and feed it back
- Secure messaging between providers
- The clinics should have the ability to run their own reports in the repository by provider and by clinic.
- A road map for stage 2 and stage 3 meaningful use

A suggestion was made to change the title of the document because "data repository" is not broad enough.

Either vendor under consideration by BCBS will accept from providers' EMR's data in HL7 or CCD format. The data transfer problem isn't avoided with either vendor; it is a question of how to pay for the data transfer. Members discussed the confusion of distinguishing between and the two separate concepts of a health information exchange and a data repository.

Dr. Griffin made a motion asking CSI to formalize the list of attributes reflecting today's discussion. The council members can then vote on it and submit it to Commissioner Lindeen as a formal recommendation. Nancy Wilke seconded the motion. It passed without dissention.

Staff was directed to revise and put the survey out for vote electronically

4. <u>Discussion of the new draft surveys</u>

The survey was split into two separate surveys, a longer one for administrators that included everything from the original survey, and a short one-page survey for doctors.

Dr. Shepard made a motion to accept the surveys and direct CSI staff to send it out to the provider community. Dr. Roberts seconded the motion. The council voted unanimously in

favor. MTPCA, Mountain Pacific Quality Health, MHA, MTMGMA, and Medicaid will all assist with distribution of the surveys.

5. <u>Discussion of legislative options for council recommendations</u>

The Council agreed this was of primary importance and asked CSI staff to outline more specific legislative proposals for the next meeting.

6. <u>Updates/reports on continuing items</u>

a. CMS RFP LOI updates

New West submitted their letter; BCBS, Medicaid, EBMS and CHIP have letters in draft. MUST is interested in the proposal and Dr. Shepard is meeting with their staff. He also has meetings planned with the state and university plans. The council decided that no recommendation from Commissioner Lindeen is necessary at this time.

b. Conflict of interest statements

The COI statements have been submitted by every council member and distributed to the council. Members were asked to submit any changes and directed CSI to post the information to the web.

c. Webinars – Provider Education The council plans for these to be the next step after survey results are compiled

d. Health Care Forum Presentations Medical Homes were a significant topic.

e. Work Plan outline revisionMembers had no comments at the time and will take it up at the next meeting.

7. Call for additional agenda items

There were no additional agenda items proposed.

8. Set meetings for the rest of the year

The next full council meeting will be on November 16th. Subcommittees are meeting on the 9th. There will be no meetings on the 23rd due to Holiday schedules. Either subcommittees or the council will meet on November 30th. December meetings will be held on the 7th and the 14th. A decision about meeting on Dec 21st will be made at the November 16th meeting. There will be no meeting on Dec 28th.